Green Team

Summer Program Application



Name:		
Address:		
City: S	State:	Zip code:
Home phone:		Cell phone:
E-mail address:		
Name of school you attend:		Grade you are entering:
Name of GED program you attend:		
Age:		
What is the best time to contact yo	u by phone?	
What is the best phone number to	use in order to c	contact you (please check one)? Home Cell
Are you able to commit to participa	ate in the full pro	ogram (BEGIN DATE AND ENDING DATE)
Yes No		
How did you hear about the Green	Team Program ((please check the appropriate box below)?
Teacher Flier	Crew Leader	
Word of mouth Website		
Friend Other:		
T-Shirt size: Small Medium	Large \(\)	K-Large XX-Large
	you working in t	he areas of trail maintenance, horticulture, landscape
2. Do you enjoy spending time	outside workin	g with your hands?
Yes No If yes, please describe why.		

	(continued on other side)
Do	you enjoy interacting with other people?
Yes	No
3.	What do you hope to learn/get out of the Green Team Program?
4.	What knowledge, skills, experiences, accomplishments or characteristics do you have that could benefit the program?
5.	What commitments do you have during the summer that may create a conflict in attending the program (sports, job, clubs, etc.)?

Please provide a recommendation letter (from a teacher, coach, past employer, etc.) with the application. Family members cannot be used as references. <u>Applications received without a recommendation letter will not be considered.</u> <u>Applications are reviewed on a first come first served basis so apply immediately.</u>

Please return your completed application with the recommendation letter to the Emerald Necklace Conservancy at <u>kjackson@emeraldnecklace.org</u>. Please email with questions.